

L17000167663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

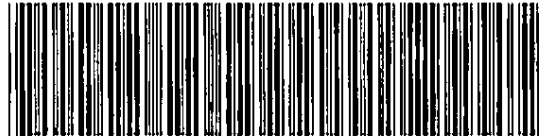
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/14/17--01019--016 **30.00

FILED
17 SEP 14 PM 2:09
TAMPA, FL 33602

n SCOTT
SEP 15 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Iron Legacy ME Lakeland FL LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

James F Walters
Name of Person

Firm/Company

5406 Pless RD
Address

Plant City FL 33565
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James F Walters at (813) 650-4304
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| ☐ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee &
Certificate of Status | ☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | ☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|--|--|--|

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
SEP 16 PM 2:09
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Iron Legacy Inc. Lakeland Fla, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 8-7-2017 and assigned Florida document number L17000167663

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5406 Pless RD
Plant City FL 33565

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5406 Pless RD
Plant City FL 33565

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

James F Walters

New Registered Office Address:

5406 Pless RD

Enter Florida street address

Plant City

Florida

33565
Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

N/A
If Changing Registered Agent, Signature of New Registered Agent

FILED
2017
AUG 14
11:20 AM
CLERK OF CIRCUIT COURT
JANUARY 11, 2017

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	James E. Walters	5406 Pless RD	☐ Add
		Plant City FL 33565	☐ Remove
			☒ Change
AMBR	Patrick Mills	1339 Walt Williams RD	☐ Add
		Lakeland FL 33809	☐ Remove
			☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

F. Effective date, if other than the date of filing: 1/1/11 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated

8-9-17

James F. Walters
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

James F Walters

Typed or printed name of signee

FILED
APR 14 PM 2:10
FBI - MEMPHIS